



**State of Louisiana**  
DIVISION OF ADMINISTRATION  
**OFFICE OF STATE PURCHASING**

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GOVERNOR

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COMMISSIONER OF ADMINISTRATION

**MEMORANDUM OSP01-01**

TO: All State Procurement Offices

FROM: Denise Lea  
Director of State Purchasing

DATE: October 12, 2000

SUBJECT: Sole Source or Proprietary Justification Form

The Louisiana Procurement Code encourages competitive specifications to obtain goods and services to meet the needs of the State, but it does allow for sole source and proprietary purchases when certain conditions are met. Purchases of this type should be limited and used only when necessary.

State Purchasing developed the attached form to simplify and expedite sole source and proprietary purchases. Compliance with all requirements on the form prior to submittal should eliminate processing delays.

We hope you find the form useful and welcome your comments.

Attachment  
DL/bk

## JUSTIFICATION FOR SOLE SOURCE OR PROPRIETARY PURCHASE

Requisition/Order No.: \_\_\_\_\_ Agency: \_\_\_\_\_

Indicate if sole source or proprietary:    Sole Source                      Proprietary

SoleSource/Proprietary Product or Service: \_\_\_\_\_

Vendor name, address and telephone Number: \_\_\_\_\_

Sole source and proprietary purchases are allowed by the Louisiana Procurement Code (La. R.S. 39:1551 *et seq.*) when certain conditions exist. This form may be used to justify sole source or proprietary purchases for unique products, services or conditions or you may write a letter that addresses each point. This will become a part of the permanent record for this purchase.

A **sole source** justification represents a request from the end user for State Purchasing to waive the bid process in accordance with La. R.S. 39:1597 and L.A.C. 34:I.901-907. For the purpose of this form, the particular item or service is available from only one supplier (usually the manufacturer) and is unique in that no other will be suitable or acceptable to meet the need.

A **proprietary** specification justification represents a request from the end user to limit the specification to describe a product proprietary to one supplier in accordance with La. R.S. 39:1655 and meets the definition and use described in L.A.C. 34:I.309. A proprietary purchase is similar to a sole source when no other is suitable or acceptable to meet the need, but there is more than one potential bidder because the manufacturer has chosen to sell his product through multiple distributors. A proprietary purchase is considered competitive and the solicitation shall include language indicating the purchase has been approved as proprietary and not invite bids for equal products.

1. Explain specification requirements and how or why **ONLY** the designated product/service meets the need. Cite the qualities/features that make this product or service unique in meeting the need.
2. Specifically name, by manufacturer and model or service provider, other products or services investigated (if fewer than two, explain).
3. State specifically why and how other products investigated are deficient in meeting the need.
4. **Sole Source** - Obtain signed letterhead quotation and declaration of sole source from corporate marketing (not sales representative) stating product or service is not sold through distributors, attach a notarized or published price list or retail price verification for the item(s), and submit all documents to your purchasing office for approval and forwarding to State Purchasing.

**OR**

**Proprietary** – Submit this justification form to your purchasing office for approval and forwarding to State Purchasing.

\_\_\_\_\_  
Signature and Title of Requisitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Additional Approval signature (if required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agency Purchasing Agent

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Approval by Head of Purchasing Agency

\_\_\_\_\_  
Date

### FOR STATE PURCHASING USE

Comment:

Purchasing Officer Recommendation:    ☐ Approve   ☐ Disapprove   Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor Approval:                      ☐ Approve   ☐ Disapprove   Signature \_\_\_\_\_ Date \_\_\_\_\_

Assistant Director of State Purchasing:    ☐ Approve   ☐ Disapprove   Signature \_\_\_\_\_ Date \_\_\_\_\_

Director of State Purchasing:                      ☐ Approve   ☐ Disapprove   Signature \_\_\_\_\_ Date \_\_\_\_\_